

PART B—ISSUE FEE TRANSMITTAL

242-660

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 5 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS

RECEIVED

OCT 14 1997

HOFFMAN WASSON AND GITLER
2361 JEFFERSON DAVIS HIGHWAY
SUITE 522
ARLINGTON VA 22202

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are on reverse side

NO

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS (of)

EXAMINER AND GROUP ART UNIT

DATE MAILED

08/502,773

07/14/95

033

REARER, J

1205

08/15/97

First Named Applicant

HALOW,

GEORGE M.

TITLE OF INVENTION

LAXATIVE/ANTIDIARRHEAL COMPOSITION COMPRISING POLYETHYLENE GLYCOL
AND FIBER BULKING AGENT

(Date)

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

1 A-4922

11/17/97

11/17/97

11/10/1997 8:10:00 PM 08502773
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4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Hoffman, Wasson & Gitler

2

3

Do not use this space for comments or other information. This form is to be used for the purpose of transmitting the issue fee. Any comments or other information should be sent to the Office of Information Systems, Patent and Trademark Office, Washington, D.C. 20531, and to the Office of Information Systems, Patent and Trademark Office, Washington, D.C. 20531.

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (Do not print)

(1) NAME OF ASSIGNEE

(2) ADDRESS (CITY & STATE OR COUNTRY)

6a. The following fees are enclosed:

6b. The following fees are enclosed:

DEPOSIT ACCOUNT NUMBER

08-2455

(ENCLOSE PART C)

☐ Issue Fee☐ Advance Order - # of Copies☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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